CLAIMS ONLY		Application Number	Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Indep	Depend	Indep	Depend
1	\						51							
2							52							
3							53							
4							54							
5	\						55							
6	\						56							
7		2					57							
8							58							
9	\						59							
10		2					60							
11		2					61							
12		2					62							
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19		2					69							
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44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	10		10				Total Indep							
Total Depend	15		7				Total Depend							
Total Claims	25		17				Total Claims							